IRS Declaration	Control	Number	(DCNI)
TRO Decidiation	COHILION	number	IDCIN.

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**♥** STAPLE STATE COPY OF W-2 HERE **♥** 

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HERE	Filer's Name (first, middle initial, last)			► Filer's Social Security Number		
	(If a joint return) Spouse's Name (first, middle initial, last)	Spouse's S	Spouse's Social Security Number			
! i	Home Address (No., Street, P.O. Box or Rural Route)					
r LACE LABEL	City or Town	State	ZIP Code			
	Tax Return Information (Whole Dollars Only)	<u> </u>	I			
	otal federal adjusted gross income (form MI-1040, line 9)			100		
	, ,			200		
	lichigan income tax withheld (form MI-1040, line 31)			300		
	ax due (form MI-1040, line 34)					
ŀ	efund (form MI-1040, line 37)			500		
rt l	I Direct Deposit of Refund (Optional - See instructions	s.)				
6.	Routing Transit Number (RTN)	of the RTN must be	01 through 12 or 21	through 32.		
			-			
7.	Name of Financial Institution					
_	A					
8.	Account Number	1 1 1	▶9. Type of Ac	count:		
			(1) Checking	(2) Savings		
	" D I (' (T					
	II Declaration of Taxpayer		information I have	outdood to neveral and the second		
igin	are under penalty of perjury that I have compared the information on rator, if applicable, and the amounts above agree with the amounts show	n on my 1998 Mich	nigan income tax retu	rn (form MI-1040). To the bes		
ie Iń	knowledge, my return is true and complete. I consent that my return a ernal Revenue Service (IRS) and subsequently by the IRS to the Mich	nigan Department o	of Treasury. This dec			
lichi	gan Department of Treasury as validation of my electronically filed Michigan	gan income tax retu	ırn.			
ign						
ere		Spouse's Signature		Date		
ırt	V Declaration of Electronic Return Originator (ERO)	and Preparer				
ave	re that I have reviewed the above taxpayer's return and that the entries obtained the taxpayer's signature on this form before submitting this	return to the Michi	gan Department of 7	Freasury. I have provided the		
equir	ver with a copy of all forms and information to be filed with the IRS arements described in IRS Pub. 1345, Handbook for Electronic Filers of I	ndividual Income T	ax Returns (Tax Yea	r 1998), and any requirements		
oecif	ed by the Michigan Department of Treasury. If I am also the prepare er's return and accompanying schedules and statements and, to the b	r, under penalty of sest of my knowled	perjury, I declare the	at I have examined the above complete. This declaration is		
	on all information of which I have knowledge.		go, they are true and	complete. This decidration is		
			Check if also a	Check if self-		
RO			preparer	employed		
ign	ERO's Signature	Date				
ere	Firm's Name (or yours if self-employed) and Address:		Federal F	Employer I.D. No.		
•			i eucidi L	imployor I.D. No.		
	penalty of perjury, I declare that I have examined this taxpayer's return dge, they are true and complete. This declaration is based on all information			ements and, to the best of my		
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nowle	arer	ation of which i hav		Check if self-		

Federal Employer I.D. No.